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10/04/2004

SHERIDAN ROSS PC 1560 BROADWAY **SUITE 1200 DENVER, CO 80202**

12/17/2004 MWDLDGE2 00000045 09599987

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	12-1	3-2004	4	**************************************	(Date)

ATTORNEY DOCKET NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR CONFIRMATION NO. 09/599,987 06/23/2000 Richard E. Fulton 3663-5 9195

TITLE OF INVENTION: MECHANICALLY ACTIVE INFUSION CATHETER

				-				
APPLN. TYPE	SMALL ENTITY	ISSUE FE	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	YES	\$685	700	\$0	\$685	01/04/2005		
EXAMINER		ART UNIT		CLASS-SUBCLASS]			
ANDERSON, CATHARINE L		3761		606-001000				
CFR 1.363). Change of correspon Address form PTO/SB/1 "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME ANI	ation (or "Fee Address" Indica or more recent) attached. Use D RESIDENCE DATA TO B	Correspondence ation form e of a Customer E PRINTED ON TI	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type) data will appear on the patent. If an assignee is identified below, the document has been filed for					
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